


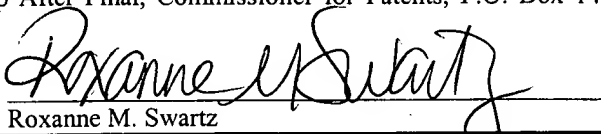


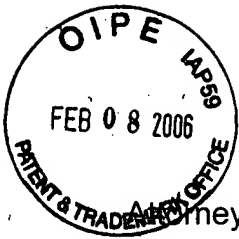
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|---|------------------------|--------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/671,436 |
| | Filing Date | September 27, 2000 |
| | First Named Inventor | Yoshinari Matsuda |
| | Group Art Unit | 2841 |
| | Examiner Name | Dameon E. Levi |
| Total Number of Pages in This Submission | Attorney Docket Number | 09792909-0425 |

| ENCLOSURES (check all that apply) | | | | | | |
|---|---|-----|--|---|--|--------------------------|
| <input checked="" type="checkbox"/> Transmitted herewith is Response to December 13, 2005 Office Action. | | | | | | |
| <input checked="" type="checkbox"/> The fee has been calculated as shown below: | | | | | | |
| (1) FOR | (2) CLAIMS REMAINING AFTER AMENDMENT | (3) | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | 19 | - | 20 | 0 | <input type="checkbox"/> x \$25.00 <input type="checkbox"/> x \$50.00 | \$0 |
| INDEPENDENT CLAIMS | 3 | - | 3 | 0 | <input type="checkbox"/> x \$100.00 <input checked="" type="checkbox"/> x \$200.00 | \$0 |
| | APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR. | | | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | <input type="checkbox"/> x \$180.00 <input type="checkbox"/> x \$360.00 ONE TIME | \$0 |
| | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0 |
| <input type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated _____ by <u>one</u> month(s) for a fee of \$ <u>120.00</u> so that the period for response is extended to _____ under 37 C.F.R. § 1.321. | | | | | | |
| <input type="checkbox"/> The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed credit card payment form to charge . | | | | | | |
| <input type="checkbox"/> The enclosed credit card payment form to charge the amount of \$_____ to cover the total claim fee and other applicable fees. | | | | | | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed. | | | | | | |

| | |
|--|--|
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
| 14. <input checked="" type="checkbox"/> Customer No. 26263 |  |
| Dated: <u>February 6, 2006</u> | Alison P. Schwartz (Registration No. 43,863) |

| | |
|--|---|
| CERTIFICATE OF MAILING | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop After Final, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below. | |
| Dated: <u>February 6, 2006</u> |  Roxanne M. Swartz |



Attorney Docket No. 09792909-0425

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Yoshinari Matsuda, et al.

Application No. **09/671,436**

Filed: **September 27, 2000**

For: PRINTED WIRING BOARD AND DISPLAY
APPARATUS

) Group Art Unit: **2841**

) Examiner: **Dameon E. Levi**

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) February 6, 2006.

) *Roxanne M. Swartz*
) Roxanne M. Swartz

Mail Stop After Final
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO DECEMBER 13, 2005 FINAL OFFICE ACTION

Dear Sir:

This Amendment is submitted in response to the Final Office Action mailed December 13, 2005. Applicants respectfully request reconsideration and allowance of the pending claims in view of the following Remarks.